## **WAIVER**

## for the

## **APPEALS SELF-HELP CLINIC**

## Waiver

I understand that the volunteer attorney is providing only limited advice and information and does not represent me in my case. The attorney will not be my attorney of record or go to court with me. I remain responsible for all aspects of my legal matter. A student volunteer or library staff may be present at the clinic to aid in the process. That person will not be providing legal advice.

I also understand that the Minnesota State Law Library is hosting the Clinic, and that the State Law Library does not endorse the volunteer, and is not liable for legal advice or assistance provided.

I have read and und	derstand this release and waiver and I agree to its terms.
SIGNED:	
PRINTED NAME:	
DATE:	